

Work Order ID 107925

October-07-13 9:02:22 AM

107925

Page 1

Item ID: D2012-107

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Clevis

Stop *NS2*

Start Date: 10/03/13

Start Qty: 12.00 ***12***

Cust Item ID:

Required Date: 10/07/13

Req'd Qty: 12.00 ***12***

Customer:

Reference:

Approvals:

Process Plan: 444-5

Date: 13-08-19 Tooling:

Date:

Run Start

NP1

00.

Date: _____ SPC (Y/N): _____

Date:

Stan

NRT 1

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS														
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Part No. _____			Work Order Update <input type="checkbox"/>																	
NCR No. _____																				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description			Sign & Date	Verification		QC Inspector						
Doc/Data																				
Equip/Tooling																				
Operator																				
Material																				
Setup																				
Other																				
Process																				
Supplier																				
Training																				
Unapproved																				
FAULT CATEGORY																				
Landing Gear				General																
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>	Weld	<input type="checkbox"/>	Wrong Stock Pulled	<input type="checkbox"/>					
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>													
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>													
Crushed/Crimped.	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>													
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>													
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>													
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>													
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>	Other	<input type="checkbox"/>													
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>													
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>													
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>													

Work Order ID 107925***107925***

Page 2

October-07-13 9:02:22 AM

Item ID: D2012-107

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Clevis

Stop

NS2

Start Date: 10/03/13 Start Qty: 12.00

12

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* Brake NC	NC BRAKE Memo Form on press using DT9511 as per Dwg D2012-107	0.00							FF 13-11-20
140 *140* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00	DAS 27 9-89 13 11 21						
150 *150* Packaging Packaging	Identify as per dwg & Stock Location: <u>SEL</u> Memo	0.00							DAS 26 9-89 13-11-21

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS										
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>									
Part No. _____																
NCR No. _____																
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector							
Doc/Data																
Equip/Tooling																
Operator																
Material																
Setup																
Other																
Process																
Supplier																
Training																
Unapproved																
FAULT CATEGORY																
Landing Gear				General												
Bending	General			Bend	General			Grain	General			Ovalized	General			Pressure/Forced
Centre Not Concentric to O/S				BOM/Route				Hardware				Over/Under tolerance				Temperature/Cure
Cracks				Broken/Damaged				Inspection Incomplete				Part Incorrect				Weld
Crushed/Crimped.				Burrs				Instructions Incomplete/Unclear				Part Lost/Missing				Wrong Stock Pulled
Cuffs				Contamination				Maintenance				Part Moved				
Heat Treat				Countersink				Mislabeled				Positioned Wrong				
Inspection Strip in Tube				Cut Too Short				Misread				Power Loss/Surge				
Ripples in Bend				Drill Holes				Offset								
Torque Waves in Extrusion				Drawing				Out of Calibration								
Turning Sequence				Finish				Out of Sequence								
Wave/Twist in Tube				Folio				Outside Dimensions								

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			<input type="checkbox"/> Rework	<input type="checkbox"/> Skid-tube	<input type="checkbox"/> Crosstube	<input type="checkbox"/> Water Jet	<input type="checkbox"/> Engineering			
			<input type="checkbox"/> Scrap	<input type="checkbox"/> Machining	<input type="checkbox"/> Small Fab	<input type="checkbox"/> Prod. Eng. Coor.	<input type="checkbox"/> Quality			
			<input type="checkbox"/> Use-as-is	<input type="checkbox"/> Thermoforming	<input type="checkbox"/> Finishing	<input type="checkbox"/> Rec/Store/Packaging	<input type="checkbox"/> Other			
			<input type="checkbox"/> Work Order Update	<input type="checkbox"/> Large Fab	<input type="checkbox"/> Composite	<input type="checkbox"/> Supplier				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						

Picklist Print

October-07-13 9:02:22 AM

Page 1

Work Order ID: 107925

Parent Item: D2012-107

Parent Item Name: Clevis

Start Date: 10/03/13

Required Date: 10/07/13

Start Qty: 12.00

Required Qty: 12.00

Comments: IPP: D 01.11.08 Re-format, Drawing to Rev. CSM

IPP Rev:E Now on Waterjet 06-06-13 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304S16GA 304/316 Sheet .063		Purchased	No			110	sf	513.3940	0.016	02021052 025		Jm.13-11-15	

Location	Loc Qty	Loc Code
MAT020	513.3939998	
123136	140.2	
M126159	31.5	
M126915	341.694	126915

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS					
		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									
FAULT CATEGORY									
Landing Gear	General								
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>				
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>				
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>				
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>				
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>					
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>				
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>						
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>						

DART AEROSPACE LTD	Work Order:	107925
Description: Clevis	Part Number:	D2012-107
Inspection Dwg: D2012	Rev: C	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

X First Article Prototype

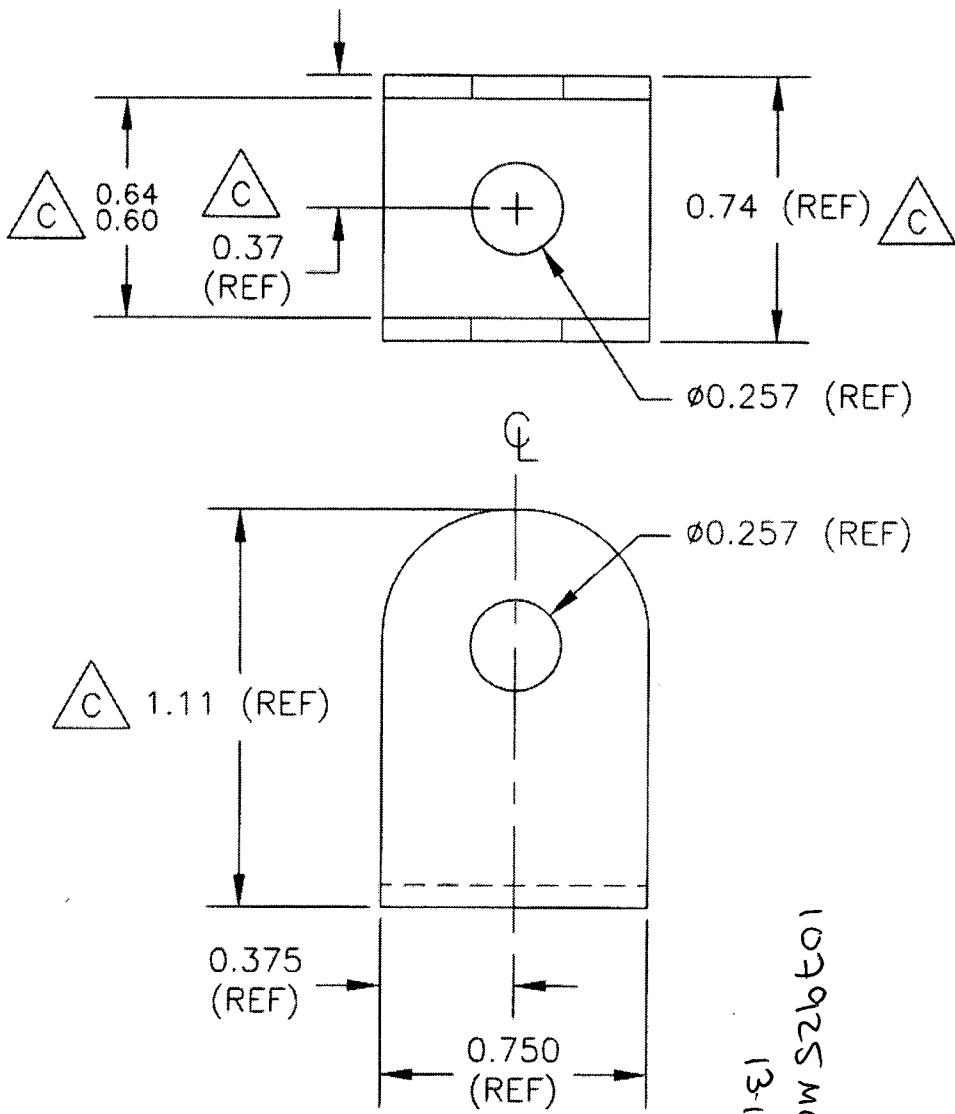
DAS

Measured by:	JM	Audited by:	27 9-89	Prototype Approval:	N/A
Date:	13-145	Date:	R 11/15	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	07.02.02	New Issue	KJ/JLM	SJL

DART

DESIGN BW	DRAWN BY <i>RF</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED <i>[Signature]</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D2012-107	REV. C SHEET 1 OF 2
DATE 99.12.20		TITLE CLEVIS	SCALE 2:1
A	94.10.27	NEW ISSUE	
B	99.04.30	ADD FLAT PATTERN	
C	99.12.20	0.74 WAS 0.680	

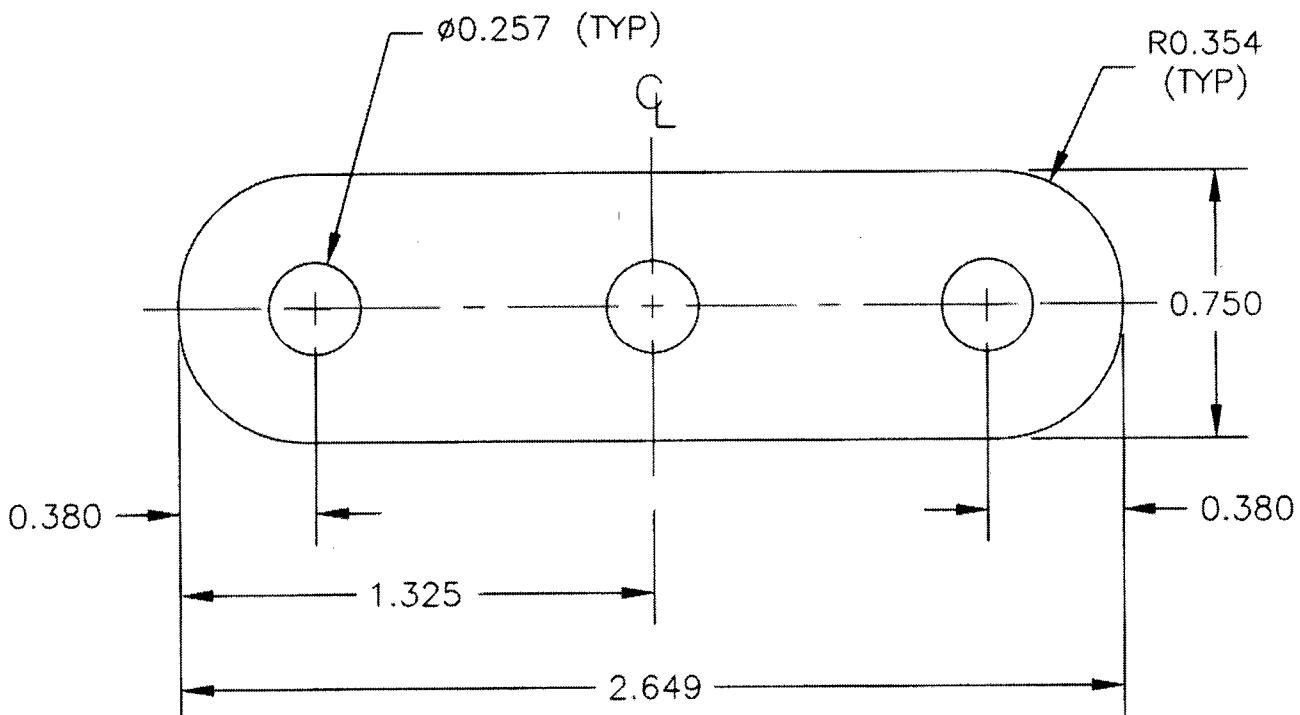
RELEASED
00.01.04 PS

MATERIAL: AISI 304/316 SS 0.063 THICK
USE 0.032 BEND RADIUS

TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
ALL DIMENSIONS ARE IN INCHES

DART

DESIGN BW	DRAWN BY RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED <i>[initials]</i>	APPROVED <i>[initials]</i>	DRAWING NO. D2012-107	REV. C SHEET 2 OF 2
DATE 99.12.20	TITLE CLEVIS	SCALE 2:1	

RELEASED
00.01.04 DSD2012-107 FLAT PATTERN

MATERIAL: AISI 304/316 SS 0.063 THICK
TOLERANCES ARE DART QSI 018 UNLESS OTHERWISE NOTED
ALL DIMENSIONS ARE IN INCHES

5266101